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**TO: Commissioner of Patents
United States Patent & Trademark Office**

FAX #: 571.273.8300

FROM: James E. Hudson III

**NUMBER OF PAGES: 5
(INCLUDING COVER PAGE)**

DATE: December 6, 2005

C/M#: 089515-000115

**SUBJECT: Power of Attorney
U.S. Pat. Appl. S/N 10/619,852**

Included with this transmittal for U.S. Pat. Appl. S/N 10/619,852 are:

1. Fax cover sheet (1 sheet)
2. Transmittal Form PTO/SB/21 (1 sheet)
3. Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address PTO/SB/82 – Chris Cowles (1 sheet)
4. Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address PTO/SB/82 – Valco Instruments Company, Inc. with 37 CFR 3.73(b) Statement (2 sheets)

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PTO/SB/21 (09-04)

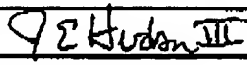
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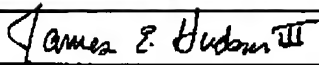
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/619,852	
	Filing Date	7/15/2003	
	First Named Inventor	Stanley Stearns	
	Art Unit	2818	
	Examiner Name	Zweig, Jeffery Shawn	
Total Number of Pages in This Submission	5	Attorney Docket Number	089515-000115

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Statement Under 37 CFR 3.73 for Assignee
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Crain, Caton & James, P.C.		
Signature			
Printed name	James E. Hudson III		
Date	December 6, 2005	Reg. No.	41,081

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO _____ on _____ the date shown below:			
Signature			
Typed or printed name	James E. Hudson III	Date	December 6, 2005

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No. 6878 P. 3/5

PTO/SB/82 (04-05)

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**REVOCATION OF POWER OF
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NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/619,852
Filing Date	07/15/2003
First Named Inventor	Stanley Stearns
Art Unit	2816
Examiner Name	ZWEIZIG, JEFFERY SHAWN
Attorney Docket Number	089515-000115

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

30903

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

30903

OR

☐ Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Chris S. Cowles

Date

Dec 1, 2005

Telephone

713.688.9345

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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PTO/SB/82 (04-05)

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/619,852
	Filing Date	07/15/2003
	First Named Inventor	Stanley Steams
	Art Unit	2816
	Examiner Name	ZWEIZIG, JEFFERY SHAWN
	Attorney Docket Number	089515-000115

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 30903

☒ Please change the correspondence address for the above-identified application to:

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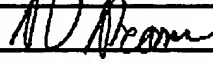
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Stanley D. Steams, President, Valco Instruments Co., Inc.		
Date	12-6-05	Telephone	713.688.9345

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Valco Instruments Co., Inc.Application No./Patent No.: 8,933,771 Filed/Issue Date: August 23, 2005Entitled: OPTICALLY GENERATED ISOLATED FEEDBACK STABILIZED BIASValco Instrument Co., Inc. a Texas Corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
- OR
- B ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: Cowles & Stearns To: Valco Instruments Co., Inc.
The document was recorded in the United States Patent and Trademark Office at
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The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.
[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Stanley D. Stearns
Signature12/1/05
DateStanley D. Stearns
Printed or Typed Name713.688.9345
Telephone NumberPresident
Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

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